ATTACH CHECK OR MONEY ORDER HERE

G

ENERAL EXCISE/USE ANNUAL RETURN & RECONCILIATION	DO NOT WRITE IN THIS AREA	16

GC1081					
Fill in this of	oval ONLY if this is an AME	NDED return			
	M M D D Y Y				
TAX YEAR ENDING		NAME:			
HAWAII TAX I.D. NO. \	W	Last 4 digits of your FEIN or SSN			
BUSINESS ACTIVITIES	Column a VALUES, GROSS PROCEEDS OR GROSS INCOME	Column b EXEMPTIONS/DEDUCTIONS (Attach Schedule GE)	Column c TAXABLE INCOME (Column a minus Column b)		
PART I - GENERAL EX	CISE and USE TAXES @ ½ OF	1% (.005)			
1. Wholesaling	<u> </u>	<u> </u>	00 Neg		
2. Manufacturing	<u> </u>		00 Neg		
3. Producing	<u> </u>		00 Neg		
4. Wholesale Services	<u> </u>		Neg O		
5. Use Tax on Imports For Resale	<u> </u>	.00	00 Neg		
6. Business Activities of Disabled Persons	<u> </u>	<u> </u>			
7. Sum of Part I, Column c (Taxable Income) — Enter the result here and on Page 2, line 21, Column (a) PART II - GENERAL EXCISE and USE TAXES @ 4% (.04)					
8. Retailing	<u> </u>	00	00 Neg		
9. Services Including Professional	<u> </u>	<u> </u>	00 Neg		
10. Contracting	<u> </u>	<u> </u>	00 Neg		
11. Theater, Amusement and Broadcasting	<u> </u>	.00	00 Neg		
12. Commissions	<u> </u>	,,00	Neg Neg		
13. Transient Accommodations Rentals	<u> </u>	<u> </u>	00 Neg		
14. Other Rentals	<u> </u>	<u> </u>	00 Neg		
15. Interest and All Others	<u> </u>	<u> </u>	Neg Neg		
16. Use Tax on Imports For Consumption	<u> </u>	<u> </u>			
17. Sum of Part II, Column	c (Taxable Income) — Enter the result he	ere and on Page 2, line 22, Column (a)	Neg Neg		
DECLARATION - I declare, under the penalties set forth in section 231-36, HRS, that this return (including any accompanying schedules or statements) has been examined by me and, to the best of my knowledge and belief, is a true, correct, and complete return, made in good faith for the tax period stated, pursuant to the General Excise and Use Tax Laws, and the rules issued thereunder.					
IN THE CASE OF A CORPORATION OR PARTNERSHIP, THIS RETURN MUST BE SIGNED BY AN OFFICER, PARTNER OR MEMBER, OR DULY AUTHORIZED AGENT.					

THE CASE OF A CONFONATION ON FANTIVENSHIP, THIS NETUNIN WOST BE SIGNED BY AN OFFICER, FANTIVEN ON WEWBEN, ON DULY AUTHORIZED AGENT.			
SIGNATURE	TITLE	DATE	
	>	>	
>	>	>	

FO	PRM G-49 Page 2 of 2 WEB Name:	
	Hawaii Tax I.D. No. W —	Tax Year Ending//
••••	GCI082 Last 4 digits of your FEIN or SSN	-
Α	Column a Column b BUSINESS VALUES, GROSS PROCEEDS EXEMPTIONS/DEDUCTIONS BUCTIVITIES OR GROSS INCOME (Attach Schedule GE) BUSINESS VALUES, GROSS PROCEEDS (Attach Schedule GE)	Column c TAXABLE INCOME (Column a minus Column b)
	Insurance Commissions 00 00 000 000 000 000 000 000 000 000	Enter this amount on line 23, Column (a)
PA	RT IV - CITY & COUNTY OF HONOLULU SURCHARGE TAX @ ½ OF 1% (.005)	inter this amount on line 25, Column (a)
19.	Oahu Surcharge	Enter this amount on line 24, Column (a)
be		of the taxation district in which you
PA	RT VI - TOTAL RETURN AND RECONCILIATION TAXABLE INCOME Column (a) TAX RAT	
21. 22. 23. 24.	Enter the amount from Part I, line 7 \$.00 x .005 Enter the amount from Part II, line 17 \$.00 x .04 Enter the amount from Part III line 18, Column c \$.00 x .0015	= \$ = \$
25.	TOTAL TAXES DUE. Add column (c) of lines 21 through 24 and enter result here. If you did not have any activity for the period, enter "0.00" here	Neg
26.	Amounts Assessed on Periodic ReturnsPENALTY \$	
27.	TOTAL AMOUNT. Add lines 25 and 26	
28.	TOTAL PAYMENTS MADE LESS ANY REFUNDS RECEIVED FOR THE TAX YEAR28.	
29.	CREDIT CLAIMED ON ORIGINAL ANNUAL RETURN. (For Amended Return ONLY)29.	
30.	NET PAYMENTS MADE. Line 28 minus line 29	
31.	CREDIT TO BE REFUNDED. Line 30 minus line 27	
32.	ADDITIONAL TAXES DUE. Line 27 minus line 30	
33.	FOR LATE FILING ONLY → PENALTY \$	
34.	TOTAL AMOUNT DUE AND PAYABLE (Add lines 32 and 33)	
35.	PLEASE ENTER THE AMOUNT OF YOUR PAYMENT. Attach a check or money order payable to "HAWAII STATE TAX COLLECTOR" in U.S. dollars to Form G-49. Write "GE", the filing period, and your Hawaii Tax I.D. No. on your check or money order. Mail to: HAWAII DEPARTMENT OF TAXATION, P. O. BOX 1425, HONOLULU, HI 96806-1425 or file and pay electronically at www.ehawaii.gov/efile If you are NOT submitting a payment with this return, please enter "0.00" here	
	36. GRAND TOTAL OF EXEMPTIONS/DEDUCTIONS CLAIMED. (Attach Schedule GE) If Schedule GE is not attached, exemptions/deductions claimed will be disallowed	